

MCAC ELIGIBILITY AND ENROLLMENT (E&E) SUBCOMMITTEE MEETING



January 18, 2023

Agenda

- **3:00 – 3:10 Welcome, Introductions, and Ground Rules:**
 - *Eric Scharf, MCAC E&E Subcommittee Chair; DC Advocacy Chair, Depression and Bipolar Support Alliance, National Capital Area Chapter;*
 - *Taylor Woods, DHCF Staff Lead, E&E Subcommittee; Special Projects Officer, Health Care Policy and Research Administration (HCPRA), DHCF*
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- **3:10 – 3:55 Department of Health Care Finance (DHCF) Updates:**
 - Update on Eligibility Restart and the End of Medicaid Continuous Coverage
 - i. Provisions in the Consolidated Appropriations Act, 2023
 - ii. District Action
 - (Danielle Lewis Wright, Associate Director, DEP, HCPRA, DHCF)*
 - Partner Portal Implementation Update
 - (Kymberlee Williams-Hasan, DCAS, DHCF)*
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- **3:55 – 4:15 Open Call: Topics, Suggestions, and Direction for the E&E Subcommittee - 2023**
 - Hybrid and in-person meetings?
 - (Eric Scharf, Subcommittee Chair)*
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- **4:15– 4:25 DHCF Enrollment Report Update/Status:**
 - (April Grady, Associate Director, Data Analytics and Policy Research Administration, DHCF)*
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- **4:25 – 4:30 Next Steps:**
 - (Taylor Woods, Special Projects Officer, HCPRA)*
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- **4:30 Adjourn**

Update on Eligibility Restart and the End of Medicaid Continuous Coverage Provisions

Danielle Lewis-Wright, Associate Director, Division of Eligibility Policy, Health Care Policy and Research Administration, DHCF



Key Dates Related to the Medicaid Continuous Enrollment Condition Provisions in the Consolidated Appropriations Act, 2023



- The Consolidated Appropriations Act, 2023 was enacted on December 29, 2022.
- This legislation decouples the continuous enrollment requirement and receipt of increased FMAP from the federal PHE declaration; Allowing states to restart redeterminations starting 4/1/23 and terminate those who are no longer eligible
- There are several Medicaid and Children's Health Insurance Program (CHIP) provisions included in the legislation:
 - Sec. 5111: Extends funding for CHIP through FY 2029
 - Sec. 5112: Requires 12-month continuous Medicaid and CHIP coverage for children, effective 1/1/24
 - Sec. 5113: Makes permanent the current state option to provide 12-month continuous postpartum coverage in Medicaid and CHIP
 - Sec. 5131:
 - Sets an end date for the FFCRA Medicaid continuous coverage requirement of 3/31/23
 - From 4/1/23 through 12/1/23, gradually phases down the enhanced FMAP



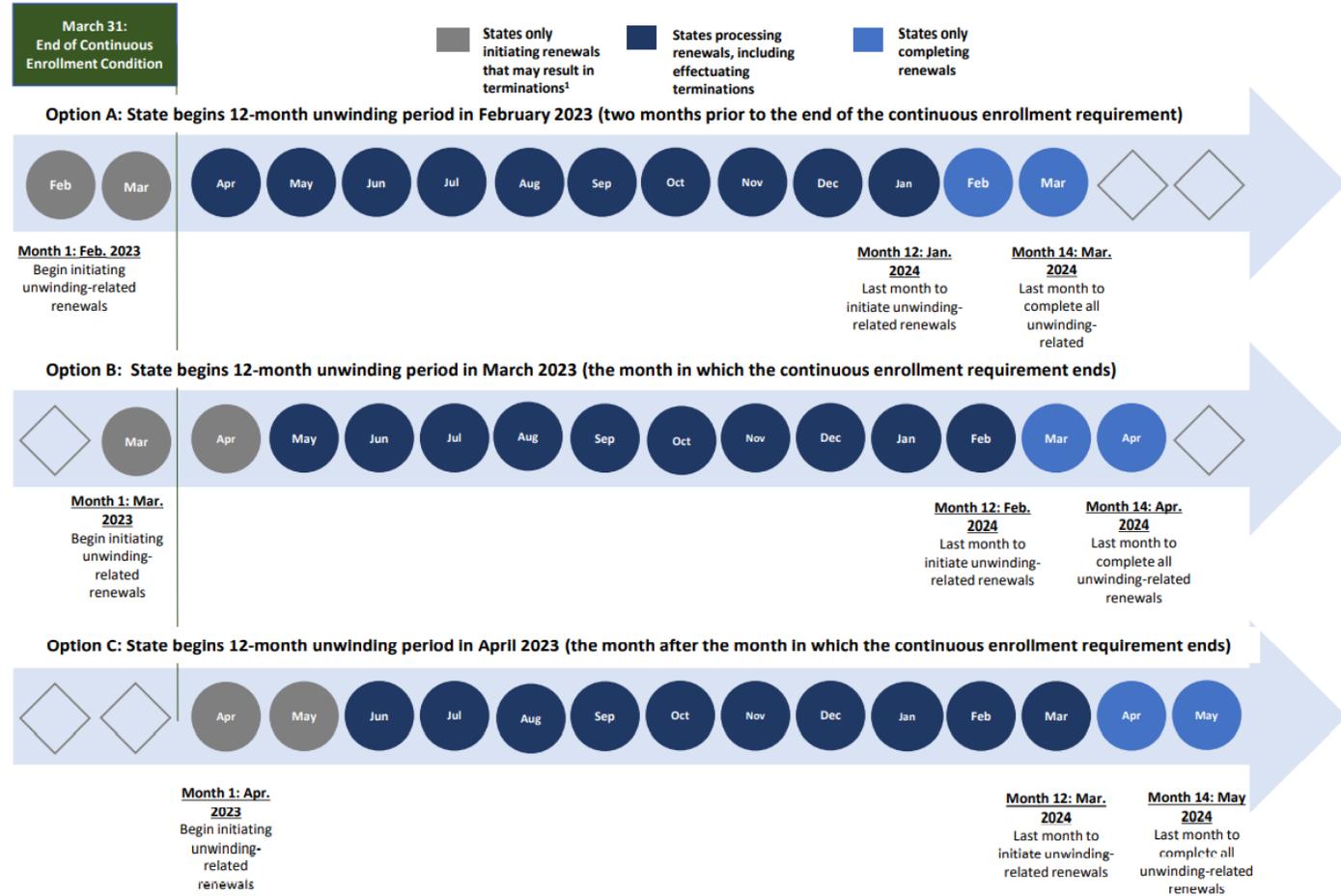
Unwinding from the Continuous Enrollment Requirement



- The bill does not modify prior guidance/requirements on the duration of the unwinding period.
- States should begin renewals in the month before, of, or after the month in which the continuous enrollment condition ends (depending on chosen unwinding option: A,B,C)
 - States must **initiate** renewals for all individuals enrolled as of the last day of the continuous enrollment condition within 12 months
 - States must **complete** renewals for individuals enrolled as of the last day of the continuous enrollment condition within 14 months.
- The District is an Option C State, meaning:
 - **60-day** notices sent to **MAGI** populations **end of March**; If no response (or determined not eligible), eligibility will end **May 31** resulting in first sets of **MAGI** drops **June 1**
 - **90-day** notices sent to **Non-MAGI** populations **end of March**; If no response (or determined not eligible), eligibility will end **June 30** resulting in first sets of **Non-MAGI** drops on **July 1**
 - This will continue throughout the 14-month unwinding period

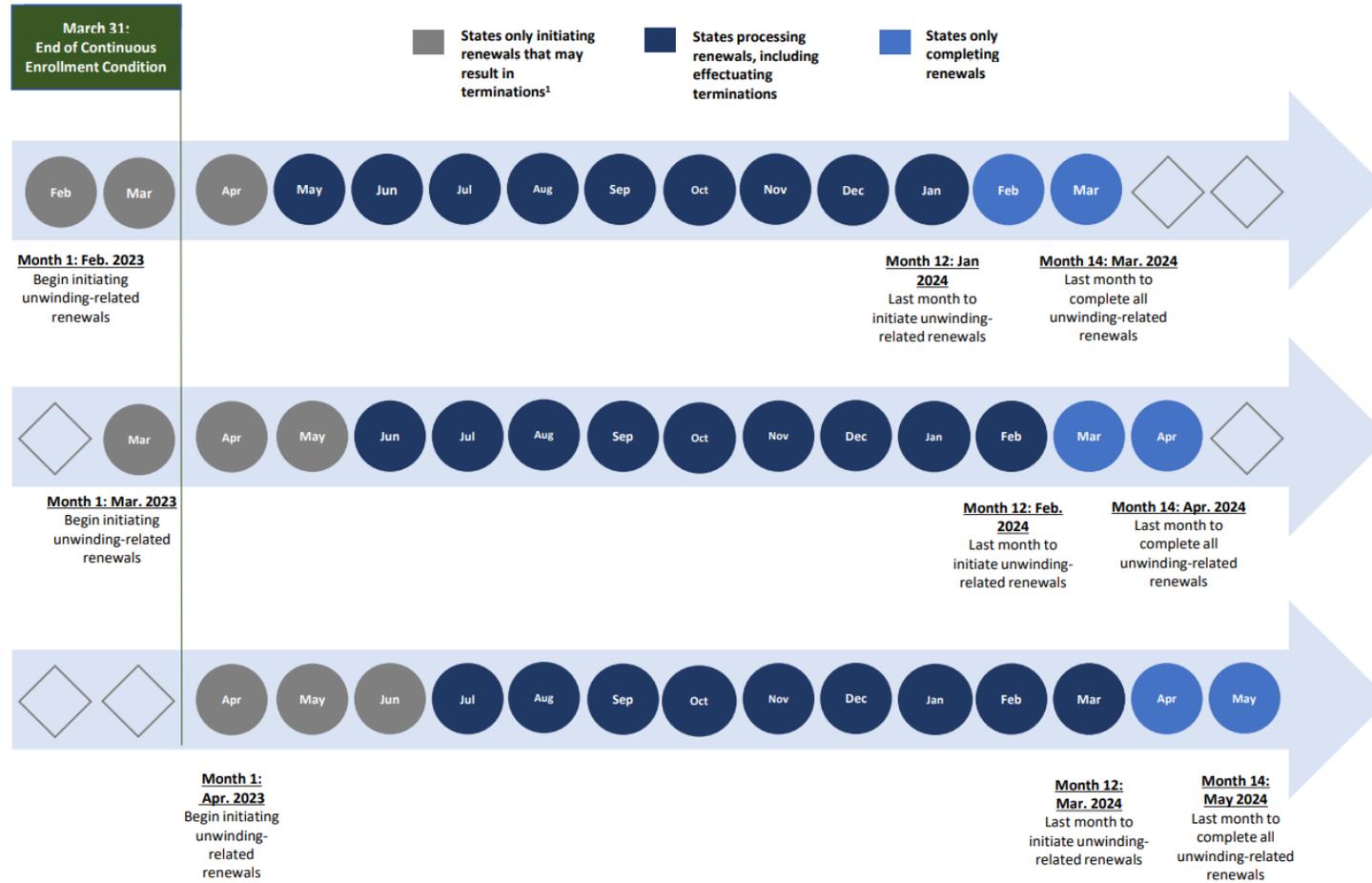


Graphic B1 – Example 1: Unwinding Timeline for States with a 60-day Renewal Process:





Graphic B2 – Example – Unwinding Timeline for State with a 90-Day Renewal Process:





CMS Requirement for States: Renewal Distribution Plan

- CMS requires states to submit a report to summarize their plans for initiating the renewals for the total caseload throughout the 14-month period.
- States are required to conduct a renewal of every beneficiary enrolled in Medicaid before taking any adverse action on Medicaid eligibility.
- CMS asked that no single month have more than 1/9th of their caseload up for renewal without explanation.



Priorities for Renewal Plan



- Renewals will be completed a time approach based on the recertification end date
- The plan priorities completion of renewals for a few groups in the earlier phase of the unwinding period groups
- Prioritize completion of renewals for beneficiaries who are only still eligible due to PHE (3-8 months of the unwinding period)
 - Important to note that this group will be entirely non-passive renewals
- For Long-Term Care (LTC), the plan is to prioritize the population still in LTC who haven't met LOC in the early months of the unwinding.(immediately after continuous enrollment ends)



Upcoming Focus Areas for Unwinding Efforts



- Completion and submission of Renewal Distribution Plan to CMS by 2/15/2023
- Eligibility Restart Communication Plan and Communication Toolkit Development
- Revising Verification Plan and updating transmittals
- System Readiness and assessment of staffing and operational Needs
- DHCF Unwinding Document

Partner Portal Implementation Update

Tamika Fitzgerald, Director, DCAS Administration, DHCF



Partner Portal Update

Current Activities:

- Partner Portal deployment has been delayed targeting February for launch
- Aggressive Campaign to encourage our Partners to complete their initial login and training
- Updating of primary information and provider members
- Training still continues with adjustments:
 - Have made training more accessible with the intro videos available on-demand.
 - Split training to have an optional hands on and working to split the module for application intake so that will also be available on demand.



Partner Portal Update

Statistics

Partner Portal Training Updates

NOV 28 – Jan 13

COURSES	DURATION	SESSIONS	REGISTRANTS	TRAINED
Introduction to Partner Portal	3 Hours	21 Scheduled 17 Held	415 Registered	229 43% of Total Users Trained
Application Intake	8 Hours 4 Hours are mandatory	13 Scheduled 9 Held	278 Registered	116 21.8% of Total Users Trained
Change of Circumstances & Transitions	4 Hours	3 Scheduled	80 Registered	
Renewals	4 Hours	-	-	-
Partner Portal for Admins	TBD	-	-	-

Partner Portal Overview

DCAS is launching a District Direct Partner Portal that will allow the District Long Term Care (LTC) Providers to:



Submit Applications



Process Renewals



Get Real-time Status Updates



Report Changes



Upload Documents



KEY BENEFITS

- ✓ A new website built for Providers
- ✓ Direct access to DCAS via the Partner Portal
- ✓ Online application scripts
- ✓ Single online source for applications.

Applications will no longer be maintained in DC Care Connect, MCIS, or uploaded into Quickbase.



KEY BENEFITS

- ✓ Visibility to renewals and verifications
- ✓ Pre-populated renewal and change scripts
Information submitted from an online renewal or change script will not require caseworkers to re-key.
- ✓ **Real-time status updates** for application processing, renewals, and verifications
Status updates will no longer require manual updates from caseworkers.
- ✓ Automation for the level of care verification



USER GROUPS IMPACTED

- NF Nursing Facilities
- ICF Intermediate Care Facilities
- IDD Individuals with Intellectual & Developmental Disabilities Waiver Specialists
- EPD Elderly & Physically Disabled Waiver Providers
- DACL Department of Aging & Community Living
- DECO Acute Care Providers
- DSNP Dual Eligible Special Needs Plans Providers





SYSTEM CHANGES

All applications will continue to be processed in DCAS until Partner Portal goes live.

PROVIDER FUNCTIONS

CURRENT SYSTEMS

FUTURE SYSTEM

Application Submission

DCCC, QB, MCIS



Partner Portal

Change of Circumstance

DCCC, QB, MCIS



Partner Portal

Renewal

DCCC, QB



Partner Portal,
DCCC

Level of Care (LoC) will continue to use DCCC.

DCCC – DC Care Connect QB – Quickbase MCIS – Medicaid Client Information System



KEY CHANGES: DC CARE CONNECT

CURRENT SUBMISSIONS

Applications, Change of Circumstance (CoC), and Renewals

Verifications: Birth Certificates, Income, Proof of Residency, Power of Attorney, and others

No Access to DCAS

FUTURE SUBMISSIONS

→ Applications, CoC, and Renewals submitted through Partner Portal

→ Applications, CoC, and Renewals submitted through Partner Portal

→ Access to Partner Portal



KEY CHANGES: QUICKBASE

Quickbase will retain historical case information

CURRENT SUBMISSIONS

Application Intake

Change of Circumstance (CoC)

Renewal (NF, IDD, ICF)

FUTURE SUBMISSIONS

Applications, CoC, and Renewals submitted through Partner Portal

* Paper & Electronic Submissions

NF – Nursing Facilities IDD – Individuals with Intellectual and Developmental Disabilities
ICF – Intermediate Care Facilities



KEY CHANGES: MEDICAID CLIENT INFORMATION SYSTEMS

CURRENT SUBMISSIONS

Application Intake

Change of Circumstance (CoC)

Renewal (NF, IDD, ICF)

FUTURE SUBMISSIONS

Applications submitted through Partner Portal

* Paper & Electronic Submissions

WHAT WILL IT LOOK LIKE?

The screenshot displays the District Direct Partner Portal interface. At the top, the header includes a star icon, the text "District Direct Partner Portal", and a user greeting "Welcome PREM MEMBER2" with a profile icon. Below the header, there are navigation tabs for "Home" and "Clients". The main content area is titled "Home" and features four widget panels:

- Quick Links:** A panel with a search bar "Search for a Person...", and links for "Training" and "Register a Person...".
- Renewal Due for Submission:** A panel with a table header: Client, Remaining Days due, Due on. It includes a refresh icon and a plus icon.
- My Clients:** A panel showing "Displaying 5 of 5" clients. The list includes: District Direct Partner Name, Bheema, Elderly LTC Providers, Test Provider 1, prem_provider1, and prem_provider3. It includes a plus icon.
- Recent Inquiries:** A panel showing "Displaying 4 of 4" inquiries. It includes a link for "All Inquiries" and a table with the following data:

Client	Inquiry ID	Created On	Updated On
Susan Brown	1039	4/28/2023 17:46	4/28/2023 17:46
TestOne	1038	4/28/2023 17:42	4/28/2023 17:42
Susan Brown	1031	8/30/2022 01:17	9/15/2022 01:50
Nash lee	1028	8/30/2022 04:59	9/2/2022 01:09

Open Call: Topics, Suggestions, Direction for the Eligibility and Enrollment Subcommittee -2023

Eric Scharf, Chair, Eligibility and Enrollment Subcommittee

Monthly Enrollment Report Update

April Grady, Director, Analytics and Policy Research Administration, DHCF

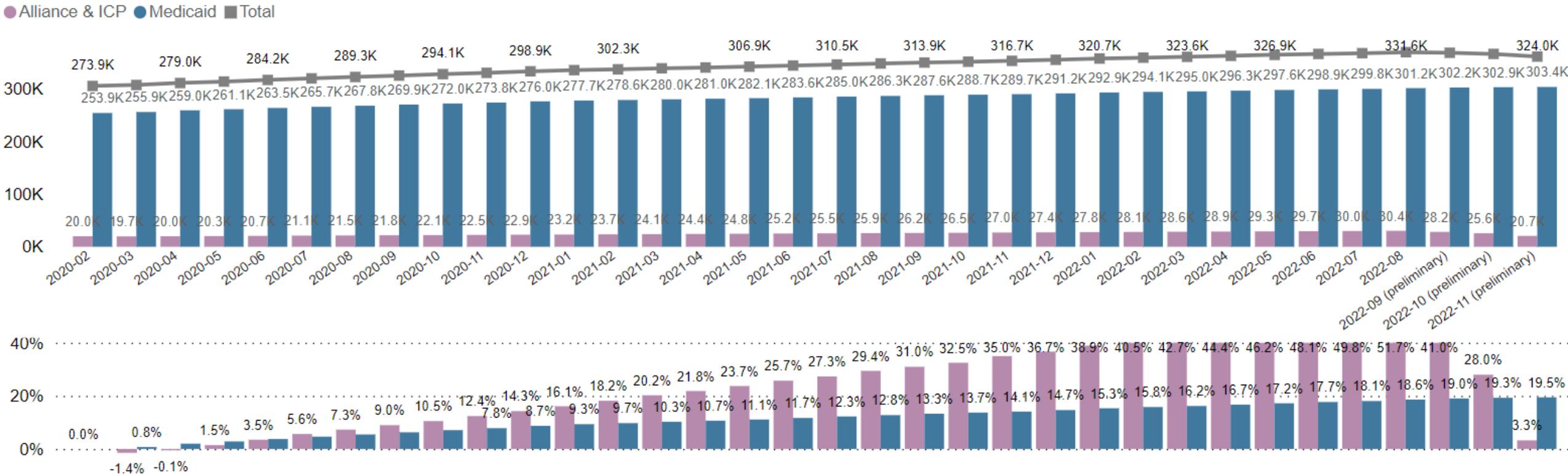
Update on Enrollment Through November 2022



DHCF enrollment for November was **324,018**

- **Medicaid (303,350)** has grown by **19.5%** since February 2020 (prior to the federal public health emergency)
- **Alliance (17,128)** and **ICP (3,540)** enrollment is now decreasing as renewals are conducted, after having grown by more than 50% from February 2020 through August 2022
- Monthly reports with additional detail are on the DHCF website: <https://dhcf.dc.gov/node/1180991>

Number Enrolled and Percentage Change in Enrollment Since February 2020 by Program



Questions and Comments